

## Complete Summary

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### TITLE

Home health care: percentage of patients with stabilization in anxiety frequency.

### SOURCE(S)

Crisler KS, Hittle DF, Conway KS, West LR, Shaughnessy PW, Richard AA, Powell MC, Lawlor KL, Donelan-McCall NS, Beaudry JM, Baillie LL, Schlenker RE, Engle K. OASIS and outcome-based quality improvement in home health care: research and demonstration findings, policy implications, and considerations for future change. Vol. 3, Research and clinical supporting documents [9 supporting documents]. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Feb 1.

Hittle DF, Crisler KS, Beaudry JM, Conway KS, Shaughnessy PW, West LR, Richard AA. OASIS and outcome-based quality improvement in home health care: research and demonstration findings, policy implications, and considerations for future change. Vol. 4, OASIS chronicle and recommendations. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Feb 1.

Shaughnessy PW, Crisler KS, Hittle DF, Schlenker RE, Conway KS, West LR, Powell MC, Richard AA. OASIS and outcome-based quality improvement in home health care: research and demonstration findings, policy implications, and considerations for future change. Vol. 1, Policy and program overview. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Feb 1.

Shaughnessy PW, Hittle DF, Crisler KS, Powell MC, Richard AA, Kramer AM, Schlenker RE, Steiner JF, Donelan-McCall NS, Beaudry JM, Engle K, Conway KS, West LR. OASIS and outcome-based quality improvement in home health care: research and demonstration findings, policy implications, and considerations for future change. Vol. 2, Research and technical overview. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Feb 1.

### Measure Domain

#### PRIMARY MEASURE DOMAIN

Outcome

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

## SECONDARY MEASURE DOMAIN

Does not apply to this measure

### Brief Abstract

## DESCRIPTION

This measure is used to assess the percentage of home health care patients whose frequency of anxiety (reported or observed) stabilized compared to a prior assessment.

The measure identifies the frequency with which the patient feels anxious.

## RATIONALE

Anxiety may be a substantial impediment to a patient's ability to function adequately in the home environment, and may contribute to deterioration in other health conditions. Effective monitoring of this factor by home health care providers, and appropriate intervention with therapy, education, or referral for other services, can help to avoid potential decline in mental health status as well as contribute to the general health and morale of the patient.

This is one of 41 OASIS-based measures for which Medicare-certified home health agencies receive performance reports from the Centers for Medicare & Medicaid Services (CMS). The reports cover Medicare and Medicaid adult non-maternity patients and compare each agency's rates to national reference rates and to the agency's own rates in the previous year. The reports provide home health agencies with information they can use to improve quality of care by targeting care practices that influence specific patient functioning and health status, as part of a comprehensive quality improvement approach.

## PRIMARY CLINICAL COMPONENT

Home health care; anxiety level

## DENOMINATOR DESCRIPTION

Patients with a completed episode of care who were eligible to stabilize in anxiety frequency (i.e., were not at the most severely impaired level of health status according to the "When Anxious (Reported or Observed)" OASIS\* item)

\*Outcome and Assessment Information Set (OASIS)

## NUMERATOR DESCRIPTION

Patients from the denominator whose frequency of anxiety (reported or observed) stabilized compared to a prior assessment

### Evidence Supporting the Measure

#### EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

### Evidence Supporting Need for the Measure

#### NEED FOR THE MEASURE

Use of this measure to improve performance  
Variation in quality for the performance measured

#### EVIDENCE SUPPORTING NEED FOR THE MEASURE

Attachment A: Properties of individual outcome measures: Reader's guide to the outcome measures properties forms. [internet]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2003 Mar [cited 2005 May 13]. Available: <http://www.ahrq.gov/qual/nhqr02/promemas.htm>.

Shaughnessy PW, Crisler KS, Hittle DF, Schlenker RE, Conway KS, West LR, Powell MC, Richard AA. OASIS and outcome-based quality improvement in home health care: research and demonstration findings, policy implications, and considerations for future change. Vol. 1, Policy and program overview. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Feb 1.

Shaughnessy PW, Hittle DF, Crisler KS, Powell MC, Richard AA, Kramer AM, Schlenker RE, Steiner JF, Donelan-McCall NS, Beaudry JM, Mulvey-Lawlor KL, Engle K. Improving patient outcomes of home health care: findings from two demonstration trials of outcome-based quality improvement. J Am Geriatr Soc 2002 Aug; 50(8): 1354-64. [PubMed](#)

Technical expert panel meeting on home health measures. [internet]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2002 October 21-22 [cited 2005 May 13]. Available: <http://www.ahrq.gov/qual/nhqr02/hhmtepm.htm>.

### State of Use of the Measure

#### STATE OF USE

Current routine use

## CURRENT USE

Accreditation  
External oversight/Medicaid  
External oversight/Medicare  
Internal quality improvement  
Quality of care research

### Application of Measure in its Current Use

## CARE SETTING

Home Care

## PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Measure is not provider specific

## LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

## TARGET POPULATION AGE

Age greater than or equal to 18 years

## TARGET POPULATION GENDER

Either male or female

## STRATIFICATION BY VULNERABLE POPULATIONS

Frail elderly

### Characteristics of the Primary Clinical Component

## INCIDENCE/PREVALENCE

In 2001, about 2.4 million elderly and disabled Americans received care from nearly 7,000 Medicare certified home health agencies.

## EVIDENCE FOR INCIDENCE/PREVALENCE

2003 data compendium. [internet]. Baltimore (MD): Centers for Medicare & Medicaid Services; 2003[cited 2004 Nov 24]. [5 p].

Medicare use of selected types of long-term care. [internet]. Baltimore (MD): Centers for Medicare & Medicaid Services; 2003 Nov[cited 2004 Nov 24]. [1 p].

Other Medicare providers and suppliers. [internet]. Baltimore (MD): Centers for Medicare & Medicaid Services; 2003 Nov[cited 2004 Nov 24]. [1 p].

## ASSOCIATION WITH VULNERABLE POPULATIONS

Many home health care patients are frail elders with chronic health conditions, functional disabilities, or cognitive impairments. Such patient characteristics are included in the statistical models used to risk adjust home health agency outcome rates for differences in the types of patients served. In addition, the capability exists to derive outcome rates separately for vulnerable populations for comparison with outcome rates for other population groups.

## EVIDENCE FOR ASSOCIATION WITH VULNERABLE POPULATIONS

Center for Health Services Research, UCHSC. Documentation of prediction models used for risk adjustment of home health agency outcomes reported on the CMS Home Health Compare Web site. Denver (CO): Center for Health Services Research, UCHSC; 2003. 29 p.

Shaughnessy PW, Crisler KS, Hittle DF, Schlenker RE, Conway KS, West LR, Powell MC, Richard AA. OASIS and outcome-based quality improvement in home health care: research and demonstration findings, policy implications, and considerations for future change. Vol. 1, Policy and program overview. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Feb 1.

Shaughnessy PW, Hittle DF. Overview of risk adjustment and outcome measures for home health agency OBQI reports: highlights of current approaches and outline of planned enhancements. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Sep. 22 p. [28 references]

## BURDEN OF ILLNESS

Unspecified

## UTILIZATION

Unspecified

## COSTS

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

## IOM CARE NEED

Getting Better  
Living with Illness

## IOM DOMAIN

Effectiveness

### Data Collection for the Measure

#### CASE FINDING

Users of care only

#### DESCRIPTION OF CASE FINDING

All adult, non-maternity skilled care patients admitted to Medicare-certified home health agencies

#### DENOMINATOR SAMPLING FRAME

Patients associated with provider

#### DENOMINATOR INCLUSIONS/EXCLUSIONS

##### Inclusions

Patients with a completed episode of care who were eligible to stabilize in anxiety frequency (i.e., were not at the most severely impaired level of health status according to the "When Anxious (Reported or Observed)" OASIS\* item)

\*Outcome and Assessment Information Set (OASIS)

##### Exclusions

Data collected about patients whose care is paid for entirely by sources other than Medicare or Medicaid, those under the age of 18, those receiving maternity services only, and those receiving only personal care/supportive services are not submitted to the federal government, therefore these types of patients are excluded from this measure. Patients whose status at start of care indicates a nonresponsive level of consciousness or whose episode of home health care ends with death or with a transfer to an inpatient facility (i.e., hospital, rehabilitation facility, nursing home, or hospice) for 24 hours or more are excluded. Patients who have not yet been discharged or transferred to an inpatient facility (incomplete episode of care) are excluded.

#### DENOMINATOR (INDEX) EVENT

Therapeutic Intervention

#### DENOMINATOR TIME WINDOW

Time window precedes index event

#### NUMERATOR INCLUSIONS/EXCLUSIONS

#### Inclusions

Patients from the denominator whose frequency of anxiety (reported or observed) stabilized compared to a prior assessment

#### Exclusions

Patients from the denominator whose frequency of anxiety (reported or observed) did not stabilize compared to a prior assessment.

#### NUMERATOR TIME WINDOW

Episode of care

#### DATA SOURCE

Special or unique data

#### LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

#### OUTCOME TYPE

Clinical Outcome

#### PRE-EXISTING INSTRUMENT USED

The Outcome and Assessment Information Set (OASIS) for Home Care

### Computation of the Measure

#### SCORING

Rate

#### INTERPRETATION OF SCORE

Better quality is associated with a higher score

#### ALLOWANCE FOR PATIENT FACTORS

Case-mix adjustment

Risk adjustment method widely or commercially available

#### DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS

To reduce the chance that a home health agency that serves sicker, older, or more frail patients looks worse in the quality measures, the quality measures are risk adjusted. Percentages are adjusted using predicted rates for each agency based on patient characteristics at admission to home health care. For a detailed

explanation of risk adjustment please visit [Overview of Risk Adjustment and Outcome Measures for Home Health Agency OBQI Reports: Highlights of Current Approaches and Outline of Planned Enhancements](#).

## STANDARD OF COMPARISON

External comparison at a point in time  
Internal time comparison

## Evaluation of Measure Properties

### EXTENT OF MEASURE TESTING

Measure is based on the best research currently available, including testing in a national quality improvement demonstration. For more information, refer to OASIS and Outcome-based Quality Improvement in Home Health Care: Research and Demonstration Findings, Policy Implications, and Considerations for Future Change. Volume 4, OASIS Chronicle and Recommendations.

### EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Hittle DF, Crisler KS, Beaudry JM, Conway KS, Shaughnessy PW, West LR, Richard AA. OASIS and outcome-based quality improvement in home health care: research and demonstration findings, policy implications, and considerations for future change. Vol. 4, OASIS chronicle and recommendations. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Feb 1.

Hittle DF, Shaughnessy PW, Crisler KS, Powell MC, Richard AA, Conway KS, Stearns PM, Engle K. A study of reliability and burden of home health assessment using OASIS. Home Health Care Serv Q2003;22(4):43-63. [PubMed](#)

Madigan EA, Fortinsky RH. Interrater reliability of the outcomes and assessment information set: results from the field. Gerontologist2004 Oct;44(5):689-92. [PubMed](#)

## Identifying Information

### ORIGINAL TITLE

Stabilization in anxiety level.

### MEASURE COLLECTION

[Outcome and Assessment Information Set \(OASIS\)](#)

### MEASURE SET NAME

[Outcome-Based Quality Improvement \(OBQI\) Measures](#)



#### SUBMITTER

Centers for Medicare & Medicaid Services

#### DEVELOPER

Center for Health Services Research, University of Colorado, under contract to  
Centers for Medicare and Medicaid Services

#### ADAPTATION

Measure was not adapted from another source.

#### RELEASE DATE

1998 Oct

#### REVISION DATE

2002 Feb

#### MEASURE STATUS

This is the current release of the measure.

#### SOURCE(S)

Crisler KS, Hittle DF, Conway KS, West LR, Shaughnessy PW, Richard AA, Powell MC, Lawlor KL, Donelan-McCall NS, Beaudry JM, Baillie LL, Schlenker RE, Engle K. OASIS and outcome-based quality improvement in home health care: research and demonstration findings, policy implications, and considerations for future change. Vol. 3, Research and clinical supporting documents [9 supporting documents]. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Feb 1.

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Shaughnessy PW, Hittle DF, Crisler KS, Powell MC, Richard AA, Kramer AM, Schlenker RE, Steiner JF, Donelan-McCall NS, Beaudry JM, Engle K, Conway KS, West LR. OASIS and outcome-based quality improvement in home health care: research and demonstration findings, policy implications, and considerations for future change. Vol. 2, Research and technical overview. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Feb 1.

## MEASURE AVAILABILITY

The individual measure, "Stabilization in Anxiety Level," is published in "OASIS and Outcome-Based Quality Improvement in Home Health Care: Research and Demonstration Findings, Policy Implications, and Considerations for Future Change. Volumes 1-4." These documents are available from the [Centers for Medicare & Medicaid Services \(CMS\) Web site](#).

## COMPANION DOCUMENTS

The following are available:

- Shaughnessy PW, Hittle DF. Overview of risk adjustment and outcome measures for home health agency OBQI reports: highlights of current approaches and outline of planned enhancements. Denver (CO): Center for Health Services Research, University of Colorado Health Sciences Center; 2002 Sep. 22 p. This document is available in Portable Document Format (PDF) from the [Centers for Medicare & Medicaid Services \(CMS\) Web site](#).
- Home health compare. [Web site]. Baltimore (MD): Centers for Medicare & Medicaid Services (CMS); [updated 2005 Sep 1]; [cited 2004 Sep 29]. [various]. Available at [www.medicare.gov/HHCompare](http://www.medicare.gov/HHCompare).
- Outcome and Assessment Information Set (OASIS) implementation manual: implementing OASIS at a Home Health Agency to improve patient outcomes. Baltimore (MD): Centers for Medicare & Medicaid Services; 2002 Dec [revised]. This document is available from the [CMS Web site](#).
- Outcome-Based Quality Improvement (OBQI) implementation manual. Baltimore (MD): Centers for Medicare & Medicaid Services (CMS); 2002 Feb. Various pagings. This document is available from the [CMS Web site](#).

## NQMC STATUS

This NQMC summary was completed by ECRI on March 21, 2005. The information was verified by the measure developer on June 20, 2005.

## COPYRIGHT STATEMENT

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